File with. towa Ethics and Campaign Disclosure Board 510 E 12<sup>th</sup>, Ste 1A

## Reset Form

Des Moines, Iowa 50319 Fax: 515-281-4073	FOR INSTRUCTIONS. DISCLOSURE S		•	ZUUB OCT 30 PM 4: 25
COMMITTEE NAME (Must be	same as on Statement of Organiza	* *	<b>-</b>	. 20
	R REPRESEN		1 1 .	ORM
MADIOTANT: Indicate by \$ 1400	of committee you are reporting for		1 1	R-2 DISCLOSURE REPORT
(1)Statewide/Legislative/Judge	Standing for Retention Candidate (2)Si	(7) School Board of Cliner Political	_	
Subdivision Candidate (8)Coun 11) Local Ballot Issue	N PAC (9) City PAC (10) School Boat	rd or Other Political Subdivision PAC	` I I—	Office Use Ordy
CANDIDATE COMMITTEES	ONLY;			god in S
Candidate Name		Political Party (if applicable)	1 1	benn
BON FEDLE	-15	DEMOCRAT	_ [ ] - · · ·	had
HOUSE OF RE	EPRESENTATIVE	District (if Senate or Gouse)	1 1	5 Deags
l ete unueste aut dubiest to pass	ible civil and criminal penalties. Pursu	ant to lows Code sections 688 32A	(7) and 68A	401(3), the candidate, for a
Late topone are emiled to pose	to the state of th	211 12 1211	(,, _,,,	1 1
- Halas		319-771-2582		10/30/2008
SIGNATURE OF PERSON FI	UNG REPORT	3/8-371-3582 TELEPHONE		DATE SIGNED
AM FILING A	18, 200x	_ REPORT FOR (1) ELECTION	/(2)NON-E	LECTION YEAR
•	aport date)	Indicate by f		
CHECK IF AMENDMENT	TO REPORT DATED	<del></del>	Local Comm	ittees, enter Date of Election
Check if this is final (termine) (You must continue)	nation) report and allach Notice of D to file reports until a DR-3 is filed.)	plasolution Form DR-3	County & Lo which Electic	gal Committees enter County in on is held
STATE	IENT OF CASH ON HAND			
committee This pro	ning of the reporting period (Total yount MUST be the same as the cas period or must be zero if this is first	th on hand at the end	\$	13,351,56
	Y TAKEN IN THIS PERIOD			•
Schedule A Cosh	Contributions total (Attach Schedule	A) (*also see in-kind below)		1,342,50
Schedule F Loans	Received total (Attach Schedule F)	Commission of the commission of		
Schodulo H Total	Sales of Campaign Property (Attach	Schedule H)		
<u>(Schedule</u>	H applies to Candidates' Commi	teos Only)		111 / 011 04
		SUB-TOTAL	*********	14,694.06
= :	. MONEY SPENT THIS PERIOD			0 510 25
· · · · · · · · · · · · · · · · · · ·	ditures total (Attach Schedule B) (**			- dy / 68 0 0
	Repayments total (Attach Schedule			11.925.71
CASH ON HAND at the end	of this reporting period (if final repor	t balance must be zero)	. \$	//, 745.//
"UNPAID BILLS (From Sch	edule D - Attach Schedule D)		\$	~0~
*IN KIND CONTRIBUTIONS	(From Schedule E - Attach Schedu	le E)	\$	<u>-0-</u>
**OUTSTANDING LOANS (F	from Schedule F - Atlach Schedule	<b>F)</b>	\$	-0-
CONSULTANT BREAKDOV	/N (Schedule G Attached?)			_YES X NO
CANDIDATE COMMITTEES	ONLY: OPERTY (From Schedule H - Attach	s Schadule H)	S	-0-
	mit a reconciled campaign account		•	***************************************
ATUTE A COMMITTERS 200	THE PRESENTE AMERICAN MARKETT			

For Instructions, Sed-Back of Form	•		Resot Form
CONTRIBUTIONS MONEY TAKEN IN		*	

(Including candidate's personal funds)

COMMITTEE NAME (	Must be same	as on Statement of Organization)	
FEDLER	FOR	REPRESENTATIVE	

SCHEDULE A (Rov 07/03)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE). LIST THE PAG IDENTIFICATION NUMBER AND THE PAG CHECK NUMBER IN THE DESIGNATED COLUMN, A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$760 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD

CAUTION: Section 68B 32A(6), prohibits the use of information copied from reports and statements for soliciting confidutions or for any commercial purpose by any person other than statutory political committees

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	VIFFOR FUND- RAISER INCOME
	ID#	HENRY COUNTY DEMOGRATS		S	
	CK#	206 E MADISON		`.	
10-15-08		MT. PLEASANT IA 52641		162,50	<del></del>
	1D# 6084	JOWA STATE CLAW- PAR COMMITT			
10 - 0	ck# 845	GOO BARCLAY BLVD		500.00	L
10-17-08	873 10#	LINCOLNSHIRE, The GOOG9		200,00	
	10#	ADRIAN J. FOECKE			
In Am alk	CK#	1, ,		100.00	
10-17-08	1D#	LUELLA C. DINGMAN		700.00	
		214 622 4.			
10-17-08	CK#	WEST POINT IN 51656		100.00	
10 1 /-08	ID#	JOSEPH J. WILDHABER		/ -	
	CK#	71 SEL It. APT B			ì
10-17-08	CNF	WEST POINT, IA 52656		50.00	
, , , , , , , , , , , , , , , , , , , ,	ID#	ANN M. RENDLAGE			
	CK#	620 AVE C			
10-17-08		WEST POINT, IA 32656		10.00	
	ID#	BAYMOND B. HROGMEIER			
	CK#	31 5 sh dt.		25,00	
10-17-08		WEST POINT, TA 52656		25,00	<u></u>
	ID#	MARLENE K. HILL			
14-15-68	CK#	1104 E MONROE	}	50.00	L
10-17-08	ID#	JOE WEHRING		<del>50.00</del>	
	1	923 HUDSON ST.			
10-17-08	CK#	TOWN CITY, TA 52240		45,00	<u> </u>
V 1 7 48	10#	STANLEY W. HAESSIG		1	
	CK#	III LAKEVIEW RD.			<u> </u>
10-18-08	UN#	WEST POINT, IA 52656		100,00	
, <del></del>	1		SUB-TOTAL	معم ماليا لم	
		TATAL (15)4	ad this ashadulal	s/,142,50	
		TOTAL (if last page	or mis schooule)	s	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consenguinity (blood relatives) and affinity (relatives by marriage)

If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column



For Instructions	, See Back	of Form
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CONTRIBUTIONS -- MONEY TAKEN IN

(including condidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

FEDLER FOR REPRESENTATIVE

Reset Form	SCHEDULE A (Rev 07/03)	MONETARY RECEIPTS
]		CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE) LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of Information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT REÇEIVÊD	V IF FO FUND RAISEF INCOM
0-21-08	CK#	LEE CTY, DEMOCERTIC PARTY CENTRAL COMMITTEE 2803 AVE T ET, MADISON, IA 52627		\$ 200.00	
	CK#	77,17,00,00,00,00			
	ID# CK#		/		
I <del>-V-Pa<i>a</i>l Markhillin</del> uma w	ID#				-
	CK#				
	ĊK#				L
	ID# CK#				
	ID# CK#				
	10# CK#				
	10#		<b>-</b>		
	2K#				
	CK#		CLID TOTAL		
		YOTAL (If last page	SUB-TOTAL  of this schedule)	s 200. 94	

\* Disclosure law requires condidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consequinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, onter "not applicable" in the relationship column.

Page 2 of 2 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form	
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SCHEDULE В MONETARY (Rev. 07/03) EXPENDITURES

## EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES. LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD

CHECK THIS BOX IF AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

1	FEDL	ER	FOR	REPR	ESEI	VTA	TIVE
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DATE EXPENDED (MM/DD/YR)	ID NUMBER (II applicable) AND PAC CHECK NUMBER	NAME AND ADDRE'SS TO WHOM EXPENDITURE: (Disdursoment) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	, AMOUNT EXPENDED
	ID# CK#/042	MT, PLEASANT UTILITIE P.O. BOX 637 MT. PLEASANT, TA 52641	S OFFICE UTILITIES	\$23.77
	<sup>CK#</sup> /043	RON FEDLER 206 6TH ST West Point, IA 52656	PIST CARD STAMPS	54.00
0-18-08	CK#/044	MT. PLEASANT UTILITIE B.G. BOY 637 MT. PLEASANT/EB 52641	UTILITIES	21.87
0 78-08	CK# /045	MASTER CARD QUAD CITY PRESS 1315 15TH ST MOLINE ILL 61265	POST CARDS GAS	990.58
0-18-08	1D# CK#/046	TOWN TELECOM P.O. BOX 1046 NEWTON, IA 50208	PHONE	180.53
0-22-8	CK# 10 47	KILT 2411 RADIO DRIVE MT. PLEASANT, IASAGY)	PADIO ADDS	375,00
0-27-08	ID# CK# 10 4 8	THE HAWK EYE  800 S MAINE ST  BURLINGTON, FA	NEWS PAPER ADD	651.40
	CK# / U \	DAILY DEMOCRAT 1226 AVE 1+ FT, MADISON, TASS637	news paper add	296.60

TOTAL (If last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain compaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expanditures to persons/antities providing consulting, advertising, fund-raiding, polling, managing, organizing services must also be datali homized on Schedule G by the amount, purpose, and date of each type of exponditure made by the person/antity on bottell of the condidate's committee (Refer to Schedule G instructions and lowa Code 58A.402(3)(i).)

Pago J	/ of <b>~/</b> /

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form SCHEDULE

(Rev. 07/03)

MONETARY EXPENDITURES

## EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD

]	CHECK THIS BOX IF
	AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization) FOR REPRESENTATIVE FEDLER NAME AND ADDRESS TO WHOM CANDIDATE PURPOSE AMOUNT DATE EXPENDED ID NUMBER EXPENDED EXPENDITURE (DESCRIBE TRANSACTION) (if applicable) (Disbursoment) WAS MADE (MM/DD/YR) AND PAC CHECK NUMBER U.S. POST OFFICE ID# STAMPS MT.PLEASANT, IA 3641 CK# 174.60 0 28-08 050 CK# ID# CK# ID# CK# ID# CK# 1D# ÇK# ID# CK# CK# SUB-TOTAL

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain compaign properly costing \$500 or more must also be inventorized on Schodule H. (Refer to Schodule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schodule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee (Refer to Schodule G instructions and towa Code 68A 402(3)(i))

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TOTAL (if last page of this schedule)